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ABSTRACT

Noting that parents play a key role in assisting their children in learning to talk, this pamphlet helps parents to understand the relationship between hearing, talking, and the process and stages of normal speech and language development. The pamphlet also suggests ways in which parents may encourage their children's listening and talking skills in the home. Two charts illustrating language development are included. (RS)

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# A GUIDE TO YOUR CHILD'S LANGUAGE DEVELOPMENT

BY

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Dear Parents,

Your child's listening and language skills are the most important tools for learning your child possesses. You, as parents play the key role in assisting your child in learning to talk. I will try, in the pages to follow, to help you to understand the relationship between hearing, talking, and the process and stages of normal speech and language development.

In addition, I will suggest some ways in which you may encourage your child's listening and talking skills in the home. Hopefully, this booklet will encourage you to develop the communication skills of your young child.

Sincerely,

Francine Anderson

Francine Anderson

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## HOW DO YOUNG CHILDREN LEARN TO TALK?

Research tells us that even before birth, the unborn child is learning language. Just what is language? Language can be defined as a set of symbols used to communicate. Those symbols may be oral, such as English, Hebrew or Swahili. They may also be non-verbal such as Sign Language. These verbal and non-verbal means of sharing our thoughts, feelings and ideas are communication. The actual physical process of communicating is termed, speech. These three terms, although oftentimes used interchangeably, are not the same. Language is the process, and speech is the means, of communication.

Language development is a gradual process involving many sequential steps. It involves both a receptive and expressive component. Receptive language is the receiving and understanding of information. Expressive language is the communicating with others which occurs after the information has been processed. The language skills acquired in both these areas are generally experienced at different ages as expressed on the pages that follow. (Figure 1)

## FIGURE 1
## LANGUAGE DEVELOPMENT CHART

| AGE | RECEPTIVE | EXPRESSIVE |
|---|---|---|
| 0-6 months | Responds to calm soothing voice | Cries and coos to express pain or pleasure |
| 6-12 months | Begins to turn toward speaker | Vocalizes when his/her name is called |
| | Comprehends lables for things | Plays games such as patty cake and peek-a-boo |
| | Understands simple commands ("Get the ball.") | Begins to attach meaning to first words |
| | Understands simple questions | |
| 12-18 months | Comprehends names of large body parts | Begins to imitate words rather than gestures |
| | Begins to group things according to categories | Vocalizes to music |

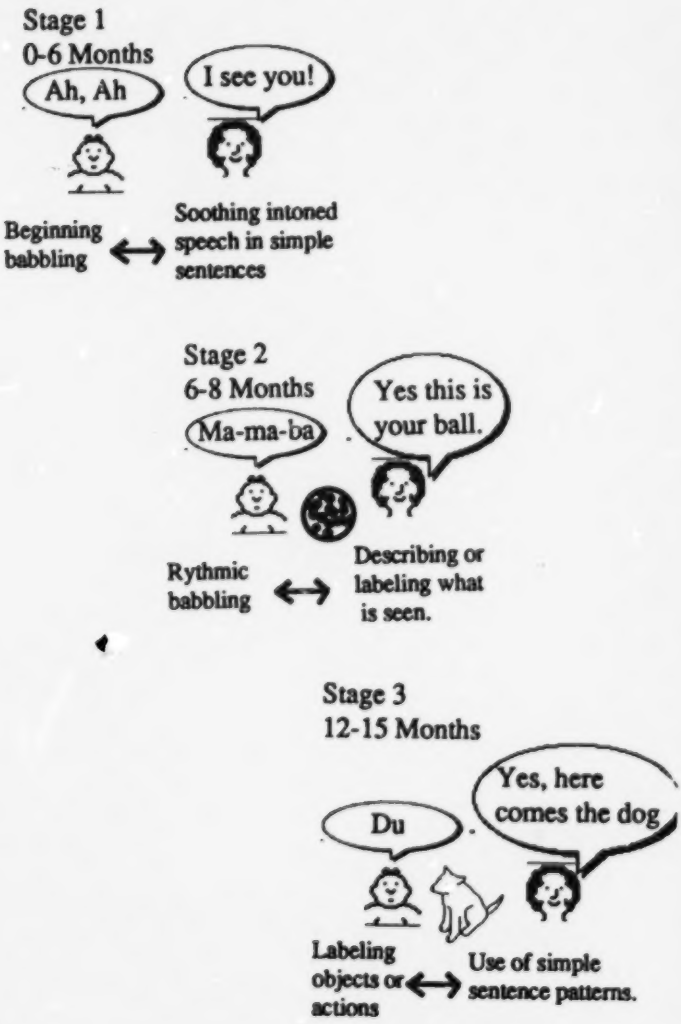
| AGE | RECEPTIVE | EXPRESSIVE |
|---|---|---|
| 12-18 months | Follows two step commands concerning one object | Constant sounds begin to appear (n,t,d,h) |
| 18 - 24 months | Pronouns and verbs begin to be understood ("Throw the ball to me") | Imitates sounds in the environment (train, horn) |
| | Can follow 2 or 3 related commands ("Get the ball and give it to Mommy.") | Refers to self by name ("Me eat") |
| | Begins using simple sentences ("Me eat") | |
| | Understands complex sentences ("After we take a bath, we will read a book.") | |
| 24-30 months | Understands several action words (eat, run, sleep) | Use of telegraphic speech ("Me go home.") |
| | Understands words as they relate to function ("What do you eat with) | Requests assistance |

| AGE | RECEPTIVE | EXPRESSIVE |
|---|---|---|
| 30-36 months | Understands most frequently used verbs, adj. and prepositions | Talks about his/her experiences |
| 30-36 months | Curiosity for how and why of things | Uses plural forms |
| | Remembers from the not too distant past | |
| 36-48 months | Listens to longer stories ing | Plays with rhyming words |
| | Understands multiple meanings ("bark" as it relates to dog and tree) | Asks questions |
| | | Uses two or more sentences to express an idea |
| 48-60 months | Understands most frequently used opposites (big-little) | Uses more coplex sentences and questions |
| | Classifies basic categories (clothes, animals, food) | May still exhibit some dysfluencies |

Young children learn language by communicating with others. This interaction depends upon the stage of development in their language learning. This is different from the age milestones cited in Figure 1. The stages of development of language concerns six different interaction levels a child usually progresses through from birth to eight years of age. You, as parents, should be aware of what stage in language development your child is, in order to interact and provide the appropriate verbal responses. Figure 2 outlines these stages. Appropriate verbal responses to the child's communication attempts are also presented.

## FIGURE 2

## STAGES IN LANGUAGE DEVELOPMENT



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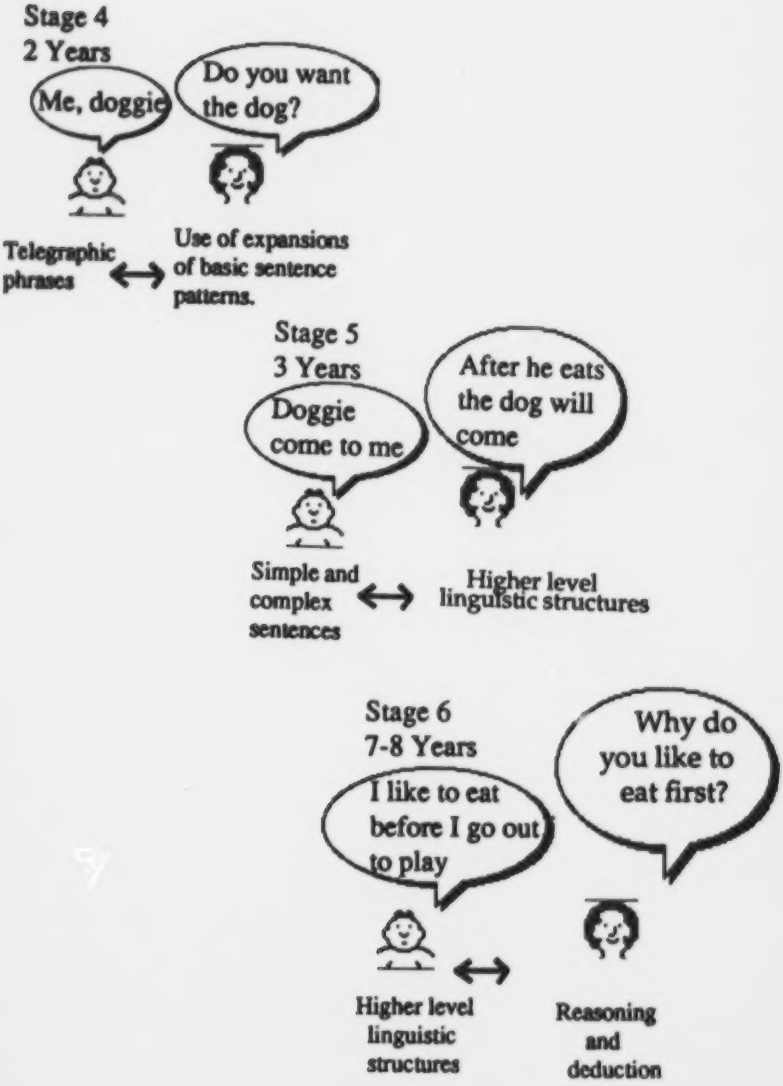
## FIGURE 2

## STAGES IN LANGUAGE DEVELOPMENT



## WHAT DO I DO IF MY CHILD HAS A LANGUAGE DELAY?

Some children may experience delays or impairments as they progress through the stages of language development. It is important that these children have appropriate modeling and positive reinforcement for all their efforts at communication. With the chronological ages delineated in Figure 2 in mind, parents could assess their child's communication patterns and determine the approximate stage their child is in. Then, you as a parent could determine the level of response you might use to encourage your child's continued language development. For example: Shawn's vocalizations include phrases, "me do it" and "more cookie." His parents note that Shawn is using telegraphic speech which is usually more characteristic of a two year old than his three years. This he is in probably in Stage IV of language development. Parents can then provide expansions and transformations of more complex sentence patterns. They can repeat the child's communication in complete sentences, "Oh, you want more cookies." They may even increase the child's vocabulary by adding new ideas or concepts. "These are chocolate chip cookies." "They are crunchy." In this way, parents can assist their child in progressing to other levels of language development more easily.

## HOW DOES HEARING AFFECT LANGUAGE DEVELOPMENT?

If a young child is not hearing well, listening becomes a frustrating experience. The child soon gives up his efforts to learn to talk. This is why it is so very important that parents be aware of their child's hearing status.

Otitis Media is probably the greatest deterrent to language acquisition in a young child. The presence of fluid in the middle ear causes a conductive hearing impairment that can greatly interfere with a young child's development of language. Otitis Media occurs most frequently between the ages of two and five years old. This fluctuating hearing loss does not allow accurate auditory information to be received on a consistent basis. Children gradually "tune out" sounds or can respond inappropriately to what they hear. Often, these children do not even hear the environmental sounds to which they should be attaching meaning.

Thus, it is extremely important that parents monitor their child's hearing status. The following symptoms may assist in making a diagnosis or referring the child to your family doctor, pediatrician, or ear specialist for an ear check-up. Possible symptoms may include:

- Draining ears
- Cold or upper respiratory infection
- Sore throat
- Fever
- Mouthbreathing
- Difficulty hearing the difference between sounds
- Use of gestures instead of talking

Unfortunately, many of our schools do not have adequate testing facilities to screen young children for middle ear problems. A very gross audiometric screening in other than sound proof rooms is the extent of most testing. Impedance audiometry has been identified as a very effective screening device and is a fairly simple testing procedure. All schools or school systems should have access to a tympanometer, and use it routinely.

## WHERE CAN PARENTS GET HELP FOR THEIR CHILD?

Prompt medical attention is necessary for a child with recurrent Otitis Media. Although a family doctor or pediatrician can diagnose and treat middle ear infections, many middle ear problems are best dealt with by an Otologist or Otolaryngologist (an ear, nose and throat doctor).

Special help in developing speech and language may also be necessary. Many communities have speech and hearing clinics to offer assistance to children with their language and hearing. At times, Special Education services may also be warranted. These are often available through the local public school system, even at the pre-school level. Parent-child sessions focusing on language stimulation activities that can be done at home are one option. Pre-school, language-based classes are another option. Special Education services offered within a regular nursery school program are another option. All will assist the parent in encouraging their child to develop language.

## WHAT HELPS CHILDREN LISTEN?

Communication is a two way street. Someone must send a message and someone must receive it. The sender initiates the message, while the receiver accepts it. A young child must understand the importance of being both a sender and a receiver.

As noted earlier, parents begin communicating with their child before birth. Research has shown that mothers who sing and talk to their babies in utero appear to have more alert children who very quickly "zero in" to the human voice, most especially their mother's. A baby who is able to receive messages, turns in the direction of sound, is reassured by soft, soothing sounds and gradually responds to someone calling his name. Babies send messages by crying, cooing, babbling, reaching out for things and smiling.

It is important to consider two factors in helping your child to listen and pay attention: first, what is said, and second, how it is said. What you say should be of interest or should be to the relevant child. Only then will true listening occur. The message should be meaningful, revolving around an experience that is familiar. Talk to your child while he/she is doing the basic routines of the day.

The "how" of the "message" can also make a big difference in your child's attending. The following suggestions may be helpful.

1. Before you give the message, make sure your child is attending.

   - Call his/her name
   - Gently touch him/her
   - Make eye contact

2. Chunk the words in your sentences and use emphasis where needed.

   (The big lion . . . growled . . . at the girl . . . and . . . ran quickly . . . into the woods).

3. Try to talk in a quiet environment. There is no sense in competing with television, traffic or other voices.

4. Body language is also helpful. Your facial expressions, gestures and body movement are all clues that assist in interpreting the message.

5. Make sure you state clearly what you mean. A young child sometimes may need several clues or examples to interpret words correctly.

## HOW CAN PARENTS IMPROVE THEIR CHILD'S TALKING?

1. Give your child a need to communicate. Children learn to communicate by having a desire to do so. Respond positively to your child's communications. Reinforce his requests for attention, communication, physical closeness, etc. Hug your child when he cries or laughs. Reach out to your child when he reaches out to you. Respond with vocalizations when he coos or babbles. These are all appropriate feedback which lets the child know that communication is pleasant and worthwhile.

2. Developing a sense of "sharing" by turn-talking is also important. Young children need to be shown that first one person talks while the other listens, and then vice-versa. Say something to your child and then take the time to wait for a response. Expecting a response and waiting for it are two important factors in sharing conversation. Being a good listener means letting your child know that you are interested in what he has to say. After listening, you must then acknowledge what your child has said.

3. Vocabulary development is another important aspect of language learning. Parents can add new words and ideas to their child's vocabulary. This may involve working closely with the child's teacher. Parent-teacher communication is absolutely essential when a child has a language impairment. It is sometimes difficult for him/her to share experiences between school and home. A language "News" book is an effective vehicle for home/school communication. This book travels from school to home with a few sentences about the day's happenings. Parents then return the book to school the following day with a few sentences about an

experience the child has had at home.

4. Interacting with mom and dad at home also assists in learning language. Helping around the house and playing games can give your child increased vocabulary. When this vocabulary development is done in a meaningful context, the learning is much more beneficial. At the same time, giving your children choices in which they must verbalize their decisions or express their wants and needs encourages children to use meaningful language.

5. How your child feels also needs to be expressed. Putting feelings into words is sometimes difficult for a language delayed child. When these feelings are present, help the child label them on identifying them so that the child will soon associate these more abstract concepts with the way he/she is feeling.

Providing language-enriching experiences for your child is a time-consuming undertaking. It is never-ending, and at times very demanding. However, it may be the most important thing you do for your child.

## SOME FINAL WORDS

"Improving Your Child's Listening and Language Skills" has been designed as a guide for parents in assisting them in the development of their child's language. Parents are the primary "language teachers" and it is very important that you understand the sequence of normal development in language. Once you understand this, you are then better able to provide the necessary language experiences for your child.

It is also important that you are aware of those "signs" that tell us language is not developing normally. Contacting your family pediatrician and local speech and hearing associations is a necessary step in securing the best possible educational program for your child. Together with the Special Education Department of your local school system, these professionals will assist you and your child in developing communication skills that will be the foundation of all learning.

Developing your child's language skills is the most valuable gift you as a parent can give your child. Don't let this opportunity pass.

Francine Anderson

## ABOUT THE AUTHOR

Francine M. Anderson is a teacher of a self-contained class for language impaired students at the McKay Campus School of Fitchburg State College in Massachusetts. She received her M.Ed., specializing in education of the hearing impaired from Boston University. She has been a teacher of the hearing impaired and the language impaired on the pre-school, primary, elementary and secondary levels. She has also developed curriculum in language development and served as language coordinator in the private and public sector.

## AUTHOR NOTES

1. The development chart was adapted from: "Improving Your Child's Listening and Language Skills," developed by Toledo Public Schools, Project Child, Toledo, Ohio, 1982.

2. The illustrations in the stages of development were adapted from: "Improving Your Child's Listening and Language Skills," developed by Toledo Public Schools, Project Child, Toledo, Ohio, 1982.